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PATENT  
Attorney Docket No.: 019934-003360US

On October 23, 2006

TOWNSEND and TOWNSEND and CREW LLP

By: Patricia Anderson



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

BURNS et al.

Application No.: 10/698,541

Filed: October 30, 2003

For: COMPOSITIONS AND METHODS  
FOR DETECTING AND TREATING  
DISEASES AND CONDITIONS  
RELATED TO CHEMOKINE  
RECEPTORS

Confirmation No.: 9963

Examiner: Fozi M. Hamud

Art Unit: 1647

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER  
37 CFR §1.97 and §1.98

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Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed.

The references were cited on an International Search Report in the corresponding PCT application. A copy of the search report is attached.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

CERTIFICATION

I hereby certify that each item of information contained in this Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



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Substitute for form 1449A&B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)				<b>Complete if Known</b>	
				Application Number	10/698,541
				Filing Date	October 30, 2003
				First Named Inventor	Burns, Jennifer M.
				Art Unit	1647
				Examiner Name	Fozi M. Hamud
Sheet	1	of	1	Attorney Docket Number	019934-003360US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T <sup>2</sup>
	AA	FERNANDEZ, Elias J. and Elias Lolis; "Structure, Function, and Inhibition of Chemokines"; <u>Annu. Rev. Pharmacol. Toxicol.</u> ; 2002; pp. 469-499; Vol. 42			<input type="checkbox"/>
	AB	DATABASE; UNIPORT Accession Number Q53RV4; "Hypothetical protein tmp_locus_35"; September 2000			<input type="checkbox"/>

Examiner Signature		Date Considered	
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\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.